Indiana State Police Methamphetamine Laboratory Occurrence Report

This form complies with the statutory requirement set forth in IC 5-2-15-3.

Date:	08-07-08	Address:	10820 S. 1000 W.
Case #:	<u>41f-19755</u>		Waldron IN.
County:	Rush		
Type of Laboratory Scizure (check one) Seizure Location (check all that apply)			
	onal Lab al/Glassware/Equipment (only) ite (only)	Residence Outbuilding Vehicle	☐ Hotel/Motel☑ Open – No Structure☐ Other:
Items Found: Location (bedroom, kitchen, open air, etc) (check all that apply) Ithium/Ammonia Reaction(s): Red Phosphorous/Iodine Reaction(s):			
Flammable Solvents:			
Water Reactive Metal (Lithium):			
Anhydrous Ammonia: tanks in open			
Hydrochloric Acid Gas Generator(s):			
Corrosive Acid:			
Corrosive Base:			
Other (item and location):			
☐ Yes 2 (☐ No	er age 18 discovered (check one) (number present) port to Child Protective Services	Ephedrin	e <u>Information</u> e/Pseudoephedrine Tracking Log erchant Tip <u>rol</u>
This report is to be faxed to the following agencies that serve the location:			
Fire Depart	ment: waldron VFD	Fax;	
Health Department: Rush Co. Health Dept.		Fax: Fax:	
Child Prote	ction Service: n/a		•
For further information regarding this methamphetamine laboratory, contact Investigating Officer: <u>Thomas Schwendenman</u> Phone <u>765-825-2115</u>			

^{**} This form is to be faxed to the Fire Department, Health Department and/or Child Protective Services Department listed within 24 hours of scene processing.

^{***} This form is to be included with the case file, and a copy sent to the Clandestine Laboratory Team Leader for retention.